PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2003

12256408

									10.		-	
		CLAIMS A	S FILED - (Column			(Column 2)		SMALL E	ENTITY	OR	OTHER SMALL	
TOTAL CLAIMS			Ч					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			Ц mir	nus 20=	* 0			X\$ 9=		OR	X\$18=	-
INDEPENDENT CLAIMS			minus 3 = *			الا		X43=		OR	X86=	
Мι	JLTIPLE DEPEI	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* 11	the difference	e in column 1 is	less than zero, enter "0" in colum			column 2		TOTAL	 	OR	TOTAL	770
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)	,	(Colum		(Column 3) SMAI			ENTITY	OR	SMALL	ENIIIY
AMENDMENT A	÷	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CL AINA	=		X43=		OR	X86=	1
<u> </u>	FIRST PRESE	INTATION OF INIC	JUITPLE DEF	EINDEINT	CLAIIVI			+145=		OR	+290=	
								TOTAL		OR	TOTAL	
		,	ADDIT. FEE		JO.,	ADDIT. FEE						
		(Column 1) CLAIMS	,	(Colum		(Column 3)				1 P		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CL AIM	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	·
(Column 1) (Column 2) (Column 3)												
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CI A114	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	·
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Paid					r four	nd in the ap	propriate box	in colu	imn 1.	